

Michigan Department of Community Health

**2003 PIHP/CMHSP Physician Injectable Drug
Coverage for Beneficiaries Enrolled in Medicaid
Health Plans**

PIHP/CMHSP physicians can only bill the Program directly for the following injectable drugs when administered through the PIHP/CMHSP clinic to beneficiaries enrolled in Medicaid Health Plans.

Procedure Code	Description	Fee Screen
J0170	Injection, adrenalin, epinephrine, up to 1 ml ampule	\$2.35
J0515	Injection, benzotropine mesylate, per 1 mg	\$3.90
J1200	Injection, diphenhydramine HCL, up to 50 mg	\$1.61
J1630	Injection, haloperidol, up to 5 mg	\$6.83
J1631	Injection, haloperidol decanoate, per 50 mg	\$9.12
J2060	Injection, lorazepam, 2 mg	\$3.14
J2680	Injection, fluphenazine decanoate, up to 25 mg	\$9.42

For injectable drugs administered through the PIHP/CMHSP clinic to beneficiaries enrolled under fee-for-service Medicaid, refer to the practitioner database for covered drugs and fee screens.

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